A SAMPLING OF LITERATURE ON RESTORATIVENESS

Basics & Theory:
Seminal description of the notion of types of attention and mental fatigue. James’ description of examples of involuntary attention is a classic.

See chapter on clarity for a discussion of the theoretical framework behind the restorative notion.

This chapter presents a description of the methodology and data analysis of the 10-year Outdoor Challenge Research Program. The first formalized presentation of the restorative environment, much of which is summarized in *The Experience of Nature* (see below).

A follow-up on the Outdoor Challenge research.

The restorative experience is not limited to the wilderness. Research on gardening suggests it too embodies the elements of a restorative experience.

This book meticulously weaves together empirical research and a conceptual framework for understanding the human/nature interaction — in its many facets — wilderness, nearby nature. Two chapters deal exclusively with the restorative concept and the Outdoor Challenge Research Program. The appendices of the book are a tremendous resource, providing brief accounts and findings of research done by the Kaplans and others related to the perspective presented in the text.

In a Lighter Vein:
An autobiography of how the author learned to track (apparently becoming a renowned criminal tracker). The restorative theme relates to Brown’s description of how he learned to "see," and follow the mystery of the track.

A charming, playful account of "red-blood" density — the psychological and physical value of microrestorative experience, or small-scale adventures in nature.

Mental Fatigue and Restoration:

Canin's work on burnout in AIDS caregivers found that individuals were particularly benefited by quiet activities and especially quiet nature activities which seemed particular conducive to reflection. By contrast, TV watching and organized sports (both playing and watching) appeared to reduce competent functioning and the resistance to burnout. While these activities are presumably rich in involuntary interest, they provide little or no time for reflection.

ABSTRACT: Psychological restoration among AIDS caregivers

"Burnout," although a popular theme in the caregiving literature, is not a well conceptualized construct. The present study recasts the challenges posed by caregiving in attentional terms, interpreting many of the symptoms associated traditionally with the "burning out" process as unnecessary but predictable outcomes of an uninterrupted cycle of mental fatigue. In addition to distinguishing some of the component parts of the fatigue experience, the study explores the potential for intervention within the context of leisure time and recreational activity. Findings identify different patterns of activities and approaches to recreational time that act to amplify or to mediate processes of fatigue. A number of modest but powerful possibilities for restoration are identified.

The consequences of different approaches of use of recreational time are described. "Escapist" leisure engagements, those that involve high levels of distraction and allow little capacity for reflection, appear to be ineffective solutions to difficult life situations and actually appear to incur negative psychological effects. By contrast, "restorative activities," that appear to be those that engage attention, but still provide "room" for reflection, influence functioning in a positive way, and provide participants with a predictable resource for restoration and renewal.

"Leisure dysfunction" is identified as a critically important condition that acts to preclude restorative opportunities. Failure to acknowledge its presence has significant implications. It both hampers efforts to engage individuals in anticipating the costs of psychologically draining or challenging activities and impedes the development of plans to manage those costs. The restorative context is contrasted with more traditional psychotherapeutic approaches and suggestions are made regarding the inclusion of restorative experiences into explicitly therapeutic contexts. Directions for accessible interventions both at the individual and agency level are addressed and areas for further investigation outlined.

Cimprich studied breast cancer patients during the course of their treatment. Two of her findings are of particular interest: 1) the attentional capacity of the patients was low enough to place their scores in the "brain-damaged" category. Further, she found that outdoor experiences led to steady improvement in attentional functioning.

ABSTRACT: Attentional fatigue and restoration in individuals with cancer

Attentional fatigue is manifested as a decline in the capacity to direct attention with reduced effectiveness in functioning. Typically, attentional fatigue follows intense exertion of mental effort. Despite the intense mental demands experience by individuals with cancer, little is known about the problem of attentional fatigue or nursing interventions that might conserve or restore attention. The study examined whether there was a pattern of decline in attentional capacity over the initial phase of treatment in women with breast cancer, and further if such change influenced quality of life. Also, the effect of an intervention aimed at restoring directed attention was explored.

Thirty two volunteers with localized breast cancer were tested with repeated measures at four key points during the 3-month period following surgery. Multidimensional assessment of attentional capacity was conducted at each observation using a battery of six tests of directed attention. Subjective experience of attentional function and perceptions of quality of life also were measured. Following the first observation, subjects were randomly assigned to receive the experimental restorative intervention (n=16) or no intervention (n=16). The intervention involved an individualized plan and contract for regular participation in activities thought to restore attention.

Subjects showed significant attentional deficits for an extended period following either mastectomy or breast conservation surgery. Overall, significant improvement in attention was not observed until 60 days following surgery. Subjects who received intervention showed a pattern of consistent gain in attentional capacity and functioning throughout the study. In contrast, the non-intervention control group showed a pattern of inconsistent performance over time. Perceived changes in quality of life were closely related to perceived changes in attentional functioning.

The sustained decline of attentional capacity following surgery for breast cancer most likely reflects fatigue of directed attention. The pattern of consistent gain in attentional capacity seen in the intervention groups suggests that nurses may effectively intervene to help individuals with cancer restore attention. The findings provide a framework for further study of attentional deficits and restorative interventions in individuals with life-threatening illness such as cancer.